Type a plus	sign (+) inside (this box	\rightarrow	+	

Type a plus sign (+) inside this box —> + PTO/SB/04 (10-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

SUPPLEMENTAL DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Attorney Dock t Number	72255/00013	
First Named Inventor	Nancy CAM WINGET	
COMPLETE	IF KNOWN	
Application Number	/	
Filing Date		
Group Art Unit		
Examiner Name		

As a below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
	I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:						
FACILITATING 802.11 RO	AMING BY PE	RE-ESTABLISH	IING SESSIC	N KE	YS		
the specification of which		(Title of the	Invention)				
is attached hereto							
OR was filed on (MM/DD/YYYY)			as United	l States	Application	Number or PCT Into	ernational
		and was ame	nded on (MM/DD/)	YYYY)			(if applicable).
Application Number		_	٦				
I hereby declare that the subject matter was part of my or our invention and wa		thed amendment e filing date of the or	amendment fil iginal application, a		dentified for s	uch invention.	
I hereby state that I have reviewed and amendment specifically referred to abo		tents of the above id	entified specification	on, inclu	iding the clai	ms, as amended by	any
I acknowledge the duty to disclose informations, material information which filing date of the continuation-in-part ap	became available						
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Coun	try	Foreign Filing (Priority lot Claimed	Certified Cop YES	oy Attached? NO
		· · · ·					
							₫
A Lifting I Continue and Lifting and Line and Line and Lifting I Continue and Lifting I Con							
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto: I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.							
Application Number(s) Filing Date (MM/DD/YYYY) Additional provisional application							
60/473,507	Additional		•	are listed on a supplemental			
						y data sheet PTC ed hereto.)/SB/02B
60/511,187	10/1	4/2003			Guda		

[Page 1 of 2]

SUPPLEMENTAL DECLARATION — UTILITY OR DESIGN PATENT APPLICATION

						_
Direct all correspondence to: Customer Nor Bar Code		23	380	OR 🗆	Correspondence address belo)W
Name						
Address						
Address						
City				State	ZIP	
	Telephon				Fax	
Country I hereby declare that all statements made herein of my true; and further that these statements were made imprisonment, or both, under 18 U.S.C. 1001 and the thereon.	y own knowled with the know	dge are true ar	ful false sta	atements and the li	nformation and belief are believed to ke so made are punishable by fine	or
Name of Sole or First Inventor:] A peti	tion has been filed	d for this unsigned inventor	
Given NANCY Name			Family N		NGET	
Inventor's Signature	W.)			Date Nov . 19,200	3
Mountain View Residence: City	<u> </u>	Californi State	a .	USA Country	USA Citizenship	
Mailing Address 325 Martens Avenue						
	•					
Mailing Address Mountain View	State C	California	ZIP 94	1040	Country USA	
Name of Second Inventor:	State				d for this unsigned inventor	
Given			Family or Sum			
Name Inventor's	<u>-</u>		or our			
Signature	Т				Date	
Residence: City	Stat	e	Country	/	Citizenship	
Mailing Address						
Mailing Address						
City	State		ZIP	•	Country	
Additional inventors are being named on the		mental Addit			O/SB/02A attached hereto.	

Please type a plus sign (+) inside this bo	ox ——▶[+	-
--------------------------------------------	----------	---

PTO/SB/81 (10-00)

Approved for use through 10/31/2002. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

POWER OF ATTORNEY OR AUTHORIZATION OF AGENT

Application Number		_
Filing Date		
First Named Inventor	Nancy CAM WINGET	
Group Art Unit		
Examiner Name		
Attorney Docket Number	72255/00013	

I hereby appo	int:			
OR	ners at Customer Number 23380 er(s) named below:		Place Customer Number Bar Code Label here	
	Name	Regi	stration Number	
<u> </u>				
		<u> </u>		
as my/our attor	ney(s) or agent(s) to prosecute the applicatio	n identified abo	ve, and to transact all	
business in the	United States Patent and Trademark Office	connected there	ewith.	
-				
Diago change t	the correspondence address for the above id	ontified applicat	ion to:	
	the correspondence address for the above-identioned Customer Number.	entineu applicat	ion to.	
The above-	mentioned Customer Number.			
OR				
Firm or				
Individual Na	ame			
Address				
Address		T		
City		State	Zip	
Country		, , , , , , , , , , , , , , , , , , , 		
Telephone		Fax		
I am the:				
✓ Applican	t/Inventor.			
·				
Assignee of record of the entire interest. See 37 CFR 3.71.				
Statement under 37 CFR 3.73(b) is enclosed. (Form PTOISB/96).				
	SIGNATURE of Applicant or Assi	gnee of Record		
Name	Nancy Cam Winget			
Signature Aan Duy				
Date November 19,2003				
NOTE: Signatures of all	I the inventors or assignees of record of the entire interest		ntative(s) are required. Submit multiple	
	signature is required, see below*.	 		
☐ *Total of1	forms are submitted.			